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INDICATION FORM**

Application Number	10/595611
Filing Date	1 May 2006
First Named Inventor	Michael David BUIST
Title	System and process
Art Unit	
Examiner Name	
Attorney Docket Number	PO7558US00

I hereby revoke all previous powers of attorney given in the above-identified application.

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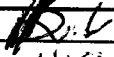
I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

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SIGNATURE of Applicant or Assignee of Record

Signature		Date	22/5/06
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Title and Company	DIRECTOR, PATIENTRACK		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of one forms are submitted.

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